

LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals

102

Lobbyist's Registration Number

FOR OFFICE USE ONLY

Postmark Date: 1/15/02

2002 Reg

✓ H (c) 142

\$110.00 FARS

1020067

1. NAME: Broadus Robert V
Last First MI

2. BUSINESSPHONE: (985) 674-0058
Area Code and Phone Number

3. BUSINESS ADDRESS: 7147 Creekwood Drive Mandeville Louisiana 70471
Street and No. City State Zip

MAILING ADDRESS: Same as above
Street and No. City State Zip

4. EMPLOYER: Pharmacia

5. EMPLOYER'S ADDRESS: 100 Route 206 North, Mail Stop 011, Peapack, New Jersey 07977
Street and No. City State Zip

6. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group;

(d) whether or not the client or someone else pays you to lobby.

1. Name: Pharmacia

Address: 100 Route 206 North, Mail Stop 011, Peapack, New Jersey 07977

Business or purpose: _____

Does this person pay you? Yes _____

If No, who pays you? _____

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2. Name _____

Address _____

Business or purpose _____

Does this person pay you? _____

If No, who pays you? _____

3. Name _____

Address _____

Business or purpose _____

Does this person pay you? _____

If No, who pays you? _____

4. Name _____

Address _____

Business or purpose _____

Does this person pay you? _____

If No, who pays you? _____

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by the Lobbyist Disclosure Act [I.S.A.-R.S. 24:50 et seq.] has been deliberately omitted.

Robert C. Brodbeck
Signature of Lobbyist

ATTACH
2" x 2"
PHOTOGRAPH
HERE
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